Low Bidder

STATE OF CALIFORNIA • DEPARTMENT OF TRANSPORTATION

CERTIFIED DVBE SUMMARY

DES-OE-0102.5 (REV 3/2008)

DISTRICT-COUNTY-F	ROUTE: _04	Son	- 37-0.3
CONTRACT NO.: _	04-2J5004		
TOTAL BID:	\$1,047,887.50		
BID OPENING DATE:	11/28/18		
BIDDER'S NAME:	O.C. Jones & Sons, Inc.		
DVBE PRIME CONTR	ACTOR CERTIFICATION	N 1	

Bid Item Number	Description of Work to Be Subcontracted to DVBE or Materials to Be Supplied by DVBE ²	For Caltrans Only	DVBE (Name, Telephone No., and Certification No.)	\$ Amount
23, 57	Settlement Repair (Polyurethane Foam), Mobilization for Settlement Repair		EagleLift, Inc. 877-752-2522 Cert #20180	\$277,150.00
12-15, 20, 24-27	Temporary and Permanent Erosion Control		Team EES 510-263-9732 Cert #1677900	\$14,994.55
ames of first tie	r DVBE subcontractors and their items	s of work listed must		\$ 292,144.55
ub Cont Code	n the names and items of work in the § 4100 et seq.) submitted with the bid nd lower tier subcontractors on this fo		Total Claimed Participation	27.88

^{1.} DVBE prime contractors must enter their DVBE reference number or their DBA name as listed with Department of General Services (DVBE prime contractors are credited with 100 percent DVBE participation and need not complete the above table).

Submit to:

MSC 43 OFFICE ENGINEER DEPARTMENT OF TRANSPORTATION 1727 30TH STREET SACRAMENTO, CA 95816-7005

SL	Total Claimed	\$ 292,144.5	5
	Participation	27.88	%

11/29/18 Signature of Bidd

(510) 526-3424

(Area Code) Telephone Number

Jason Martin Contact Person (Type or Print)

SOIS NON 30

^{2.} If 100% of an item is not performed or supplied by the DVBEs, describe the exact part, including the planned location of work to be performed, of item to be performed or supplied by DVBE.

O.C. Jones & Sons, Inc. 1520 Fourth Street Berkeley, California 94710

Telephone: (510) 526-3424 Fax: (510) 525-0457

LETTER OF TRANSMITTAL

то:	CA Dept. of Tran Attn: Office Eng 1727 30 th Street Sacramento, CA	rineer – MS 43	SUBJECT:	Contract No. 04-2J5004
Attn:			DATE:	November 29, 2018
WE SEN	D THE FOLLOWI	NG DOCUMENTS FOR	ACTION OR USE	AS INDICATED:
For a	pproval or action	X For your file	es or information	For review and comment
Sign	& return both copies	Returned as	s requested	See note below
No. of Copies	Date	Description		
1		Certified DVBE Summary		
1		CERTIFIED SMALL BUSINES	S LISTING FOR THE N	ION-SMALL BUSINESS PREFERENCE

Very truly yours,

O. C. Jones & Sons, Inc.

Heidi Faria, Estimating Assistant

	00012	Package Express US Airbill Trading 8134 7325 8525	Form D215 4 Express Package Service *To meet le	MURG Recipient's Copy
C	6	Sender's Heidi Favia Phone 510 526:3424 Company D C JONES & SONS INC	Next Business Day FedEx First Overnight Earliest next business morning delivery to select locations. Friday shipments will be delivered on Monday unless Saturday Delivery is selected. FedEx Priority Overnight Next business morning "Friday shipments will be delivered on Monday unless Saturday Delivery is selected.	For probagne over TRI line, use the FedEx Express Feeight IS Almill. 2 or 3 Business Days FedEx 2Day A.M. Second business morning.* Saturdey Delivery NOT available.
	FedEx 1,800,463,3339	Address 1520 4TH ST Dept/Roor/Suits/Room City BERKELEY State CA ZIP 74710-1748 2 Your Internal Billing Reference GFE- 04-255004	react cuaries morning.** Togy appropriate will be distilled an Monday unless Saturday Delivery is selected. FedEx Standard Overnight Next business afternoon.* Saturday Delivery NOT evallable. 5 Packaging *Declared value limit \$500. FedEx Envelope* FedEx Pak*	FedEx 2Day Second business afternoon.* Thursdey shipments will be delivered on Monday unless Saturdey Delivery it selected. FedEx Express Saver Third business day.* Saturday Delivery NOT available.
C C	fedex.com 1.800.GoFedEx	3 To Recipient's Office Eligineer Phone (1/4 1/64-5500 Company Caltains	Saturday Delivery NOT evaluable for FedEx Standard Overnight, FedEx 2Day A.M., o No. Signature Required Direct Sic	r FedEx Express Sever. Indirect Signature
(peu	Address 72 7 30 th 51 M5 - 3 We cannot deliver to P.O. boxes or P.O. ZIP codes. Address Address Address Use this line for the HOLD location address or for continuation of your shipping address. City CVAMANT State ZIP TS S S S S S S S S	One box must be checked. One box must be checked. One box must be checked. Ves Shopper's Declaration. Restrictions apply for dangerous goods—see the current FedEx Service G 7 Payment Bill to: Enter FedEx Acct. No. or	Dry Ice Dry Ic
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Fed 3x.

FRI - 30 NOV 10:30A